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CONFIRMATION NO. 4605

<b>SERIAL NUMBER</b> 10/632,817	<b>FILING OR 371(c) DATE</b> 08/04/2003 <b>RULE</b>	<b>CLASS</b> 252	<b>GROUP ART UNIT</b> 1751	<b>ATTORNEY DOCKET NO.</b> 013235-016	
<b>APPLICANTS</b> Neil A. Roberts, Bristol, UNITED KINGDOM; Owen R. Chambers, Bristol, UNITED KINGDOM;					
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/053,569 01/24/2002 ABN which is a DIV of 09/351,335 07/12/1999 PAT 6,428,720 <i>R</i>					
<b>** FOREIGN APPLICATIONS *****</b> UNITED KINGDOM 022789.9 11/29/2002 UNITED KINGDOM 0228306.7 12/04/2002 <i>R</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 10/31/2003</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> UNITED KINGDOM	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 23	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 23906					
<b>TITLE</b> Refrigerant composition					
<b>FILING FEE RECEIVED</b> 934	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		